

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. **10728138**  
APPLICANT(S)

FILED DATE **12-23-03**

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	CND	DEP	CND	DEP	CND	DEP		CND	DEP	CND	DEP	CND	DEP	CND	DEP
1							51								
2							52								
3							53								
4							54								
5							55								
6							56								
7							57								
8							58								
9							59								
10							60								
11							61								
12							62								
13							63								
14							64								
15							65								
16							66								
17							67								
18							68								
19							69								
20							70								
21							71								
22							72								
23							73								
24							74								
25							75								
26							76								
27							77								
28							78								
29							79								
30							80								
31							81								
32							82								
33							83								
34							84								
35							85								
36							86								
37							87								
38							88								
39							89								
40							90								
41							91								
42							92								
43							93								
44							94								
45							95								
46							96								
47							97								
48							98								
49							99								
50							100								
TOTAL IND.							TOTAL IND.								
TOTAL DEP.							TOTAL DEP.								
TOTAL CLAIMS							TOTAL CLAIMS								

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10728138  
APPLICANT(S)

FILED DATE 12-03-03

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
101		1				
102	1					
103		1				
104		1				
105		1				
106		1				
107		1				
108		1				
109		1				
110	1					
111		1				
112		1				
113		1				
114		1				
115		1				
116		1				
117		1				
118		1				
119		1				
120		1				
121		1				
122		1				
123		1				
124		1				
125		1				
126		1				
127		1				
128		1				
129		1				
130		1				
131		1				
132		1				
133		1				
134	1					
135		1				
136		1				
137		1				
138		1				
139		1				
140		1				
141		1				
142		1				
143		1				
144		1				
145		1				
146		1				
147		1				
148		1				
149		1				
150		1				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
151		1				
152		1				
153		1				
154		1				
155		1				
156	1					
157		1				
158		1				
159		1				
160		1				
161		1				
162		1				
163		1				
164		1				
165		1				
166		1				
167		1				
168		1				
169		1				
170		1				
171		1				
172		1				
173		1				
174		1				
175		1				
176		1				
177		1				
178		1				
179		1				
180		1				
181		1				
182		1				
183		1				
184		1				
185		1				
186		1				
187		1				
188		1				
189		1				
190		1				
191		1				
192		1				
193		1				
194		1				
195		1				
196		1				
197		1				
198		1				
199		1				
200		1				
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.  
**10728 138**  
APPLICANT(S)

FILING DATE  
**12-03-03**

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	C/D	DEP	C/D	DEP	C/D	DEP		C/D	DEP	C/D	DEP	C/D	DEP
701		1					51						
702							52						
703		1					53						
704							54						
705		1					55						
706		1					56						
707		1					57						
708		1					58						
709							59						
710							60						
711							61						
712							62						
713							63						
714							64						
715							65						
716							66						
717							67						
718							68						
719							69						
720							70						
721							71						
722							72						
723							73						
724							74						
725							75						
726							76						
727							77						
728							78						
729							79						
730							80						
731							81						
732							82						
733							83						
734							84						
735							85						
736							86						
737							87						
738							88						
739							89						
740							90						
741							91						
742							92						
743							93						
744							94						
745							95						
746							96						
747							97						
748							98						
749							99						
750							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						